

FORMAL

IN RE APPLICATION NUMBER: 09/815,449

TRANSMITTAL COVER LETTER FOR FACSIMILE TRANSMISSION

PLEASE DELIVER THE FOLLOWING PAGES TO:

Hon. Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450Attention: EXAMINER Andrew J. Fischer
GROUP ART UNIT 3622

FACSIMILE NUMBER: (703) 872-9306

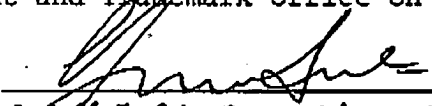
THE SENDER IS:

Edward M. Arons
Registration Number 44,511
FISH & NEAVE LLP
1251 Avenue of the Americas
New York, New York 10020-1105
Tel.: (212) 596-9000
Fax.: (212) 596-9090

CLIENT/MATTER NO. 000598.0002

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this paper is being facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.

November 5, 2004
Date
Christopher J. Smith - Patent Room Admin

TOTAL NUMBER OF PAGES, INCLUDING COVER LETTER: 11

DATE: 11/5/04

FACSIMILE OPERATOR: Plaine*****
THIS COMMUNICATION IS INTENDED ONLY FOR THE USE OF THE ADDRESSEE AND MAY CONTAIN INFORMATION THAT IS PRIVILEGED AND CONFIDENTIAL. IF YOU ARE NOT THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT THE UNAUTHORIZED DISSEMINATION OF THE COMMUNICATION IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE NOTIFY US IMMEDIATELY BY TELEPHONE.*****
PLEASE ACKNOWLEDGE SAFE RECEIPT OF THIS TRANSMISSION BY SIGNING AND RETURNING THIS COVER SHEET TO US BY FACSIMILE.

WE ACKNOWLEDGE SAFE RECEIPT OF THIS TRANSMISSION

SIGNED: _____

DATE: _____

IF NOT, PLEASE CALL BACK AS SOON AS POSSIBLE
PHONE (212) 596-9300 (ASK FOR "FAX OPERATOR")

RECEIVED
CENTRAL FAX CENTER

NOV 05 2004

PATENTS
ATG-2

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Peter A. Burton
Application No. : 09/815,449 Confirmation No.: 7650
Filed : March 22, 2001
For : METHODS AND APPARATUS FOR ON-LINE
ORDERING
Group Art Unit : 3627
Examiner : Andrew J. Fischer

New York, New York
November 5, 2004

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

TRANSMITTAL LETTER

Sir:

Transmitted herewith: ☒ a Supplemental Reply To
Office Action; ☐ an Information Disclosure Statement; to be
filed in the above identified patent application.

FEE FOR ADDITIONAL CLAIMS

☒ A fee for additional claims is not required.

☐ A fee for additional claims is required.

The additional fee has been calculated as shown below:

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEES
TOTAL CLAIMS	165	- 165	* = 0 X	\$ 9	= \$ 45.00
INDEPENDENT CLAIMS	25	- 25	** = 0 X	\$ 44	= \$ 0.00
FIRST PRESENTATION OF A MULTIPLE DEPENDENT CLAIM				+ \$ 150	= \$ 0.00
* If less than 20, insert 20.				TOTAL	<u>\$ 00.00</u>
** If less than 3, insert 3.					

- [] A check in the amount of \$_____ in payment of the additional claims is transmitted herewith.
- [] Please charge \$_____ to Deposit Account No. _____ in payment of the filing fee.
- [X] The Director is hereby authorized to charge payment of any additional fees required under 37 C.F.R. § 1.16 in connection with paper(s) transmitted herewith, or credit any overpayment of same, to deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.

EXTENSION FEE

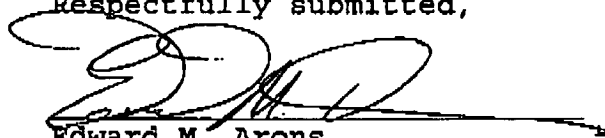
- [] The following extension is applicable to the Reply filed herewith; [] \$55.00 extension fee for response within first month pursuant to 37 C.F.R. § 1.136(a);

☐ \$215.00 extension fee for response within second month pursuant to 37 C.F.R. § 1.136(a); ☐ \$490.00 extension fee for response within third month pursuant to 37 C.F.R. § 1.136(a); ☐ \$765.00 extension fee for response within fourth month pursuant to 37 C.F.R. § 1.136 (a); ☐ \$1040.00 extension fee for response within fifth month pursuant to 37 C.F.R. 1.136(a).

☐ Please charge the ☐ \$55.00; ☐ \$210.00; ☐ \$475.00; ☐ \$740.00; ☐ \$1005.00; extension fee to Deposit Account No. _____. A duplicate copy of this transmittal letter is transmitted herewith.

☒ The Director is hereby authorized to charge payment of any additional fees required under 37 C.F.R. § 1.17 in connection with the paper(s) transmitted herewith, or to credit any overpayment of same, to Deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.

Respectfully submitted,



Edward M. Arons
Registration No. 44,511
Agent for Applicant
FISH & NEAVE LLP
Customer No. 1473
1251 Avenue of the Americas
New York, New York 10020-1105
Tel.: (212) 596-9000
Fax: (212) 596-9090

RECEIVED
CENTRAL FAX CENTER
NOV 05 2004

PATENTS
ATG-2

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Peter A. Burton
Application No. : 09/815,449 Confirmation No.: 7650
Filed : March 22, 2001
For : METHODS AND APPARATUS FOR ON-LINE
ORDERING
Group Art Unit : 3627
Examiner : Andrew J. Fischer

New York, New York
November 5, 2004

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

TRANSMITTAL LETTER

Sir:

Transmitted herewith: ☒ a Supplemental Reply To
Office Action; ☐ an Information Disclosure Statement; to be
filed in the above identified patent application.

FEE FOR ADDITIONAL CLAIMS

☒ A fee for additional claims is not required.

☐ A fee for additional claims is required.

The additional fee has been calculated as shown below:

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEES
TOTAL CLAIMS	165	- 165	* = 0 X	\$ 9	= \$ 45.00
INDEPENDENT CLAIMS	25	- 25	** = 0 X	\$ 44	= \$ 0.00
FIRST PRESENTATION OF A MULTIPLE DEPENDENT CLAIM				+ \$ 150	= \$ 0.00
					TOTAL \$ <u>00.00</u>

* If less than 20, insert 20.

** If less than 3, insert 3.

[] A check in the amount of \$_____ in payment of the additional claims is transmitted herewith.

[] Please charge \$_____ to Deposit Account No. _____ in payment of the filing fee.

[X] The Director is hereby authorized to charge payment of any additional fees required under 37 C.F.R. § 1.16 in connection with paper(s) transmitted herewith, or credit any overpayment of same, to deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.

EXTENSION FEE

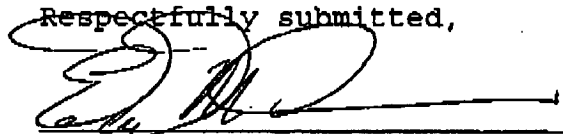
[] The following extension is applicable to the Reply filed herewith; [] \$55.00 extension fee for response within first month pursuant to 37 C.F.R. § 1.136(a);

☐ \$215.00 extension fee for response within second month pursuant to 37 C.F.R. § 1.136(a); ☐ \$490.00 extension fee for response within third month pursuant to 37 C.F.R. § 1.136(a); ☐ \$765.00 extension fee for response within fourth month pursuant to 37 C.F.R. § 1.136 (a); ☐ \$1040.00 extension fee for response within fifth month pursuant to 37 C.F.R. 1.136(a).

☐ Please charge the ☐ \$55.00; ☐ \$210.00; ☐ \$475.00; ☐ \$740.00; ☐ \$1005.00; extension fee to Deposit Account No. _____. A duplicate copy of this transmittal letter is transmitted herewith.

☒ The Director is hereby authorized to charge payment of any additional fees required under 37 C.F.R. § 1.17 in connection with the paper(s) transmitted herewith, or to credit any overpayment of same, to Deposit Account No. 06-1075. A duplicate copy of this transmittal letter is transmitted herewith.

Respectfully submitted,



Edward M. Arons
Registration No. 44,511
Agent for Applicant
FISH & NEAVE LLP
Customer No. 1473
1251 Avenue of the Americas
New York, New York 10020-1105
Tel.: (212) 596-9000
Fax: (212) 596-9090